Eill'ib this inform	lation to identify your case:				
				Check one box of Form 122A-1Sup	only as directed in this form and in p:
Debtor 1 SelV		kumar Last Name	-	1 There is no	presumption of abuse.
Debtor 2 (Spouse, if filing) First N	ame Middle Name	Last Name		2. The calculat	tion to determine if a presumption of
United States Bankru	uptcy Court for the: Southern District of Texas	3			es will be made under <i>Chapter 7</i> Calculation (Official Form 122A–2).
Case number(If known)	11-34-299		3. The Means Test does not apply now because of qualified military service but it could apply later.		
			_, _	Check if this	is an amended filing
Official For	m 122A—1				
	7 Statement of Your	Current Mc	nthl	v Income	12/15
	d accurate as possible. If two married p			<u> </u>	
pace is needed, a dditional pages, v lo not have prima	trach as possible. If two married parttach a separate sheet to this form. Including the pour name and case number (if knowing) consumer debts or because of quality (b)(2) (Official Form 122A-1Supp) with the consumer of the part of the	ude the line number to lown). If you believe tha fying military service,	which that you are	e additional infor exempted from a	mation applies. On the top of any presumption of abuse because you
Part 1: Calcu	late Your Current Monthly Income				Port of Young
1. What is your r	narital and filing status? Check one only.				.IIII 'S & 2017
	ed. Fill out Column A, lines 2-11. nd your spouse is filing with you. Fill out	hath Calumna A and P	lines 2 11	•	JUL 262017
,	nd your spouse is NOT filing with you. Y			l .	Dank! A. Brankey, Clark of Court
_	g in the same household and are not leg	•		mns A and B lines	·
under spous	g separately or are legally separated. Fill penalty of perjury that you and your spous se are living apart for reasons that do not in rage monthly income that you received	e are legally separated clude evading the Mean	under nor s Test red	bankruptcy law the quirements. 11 U.S	at applies or that you and your .C. § 707(b)(7)(B).
bankruptcy ca August 31. If the Fill in the resul	ase. 11 U.S.C. § 101(10A). For example, if ne amount of your monthly income varied d t. Do not include any income amount more nat property in one column only. If you have	you are filing on Septer uring the 6 months, add than once. For example	nber 15, the the incon , if both s	he 6-month period ne for all 6 months pouses own the sa	would be March 1 through and divide the total by 6 me rental property, put the
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse
	ages, salary, tips, bonuses, overtime, an roll deductions).	d commissions		\$ <u>0.0</u> 0	\$
Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. \$					\$
of you or you from an unmar and roommate	om any source which are regularly paid r dependents, including child support. In ried partner, members of your household, y s. Include regular contributions from a spot t include payments you listed on line 3.	nclude regular contributi vour dependents, paren	ons ts,	\$ <u>0.0</u> 0	\$
	om operating a business, profession,	Debtor 1 Debtor 2			
or farm Gross receipts	(before all deductions)	\$_0.00 _{\$}			
Ordinary and r	necessary operating expenses	- \$ <u>0.00</u> - \$			
Net monthly in	come from a business, profession, or farm	\$_0.00 <u>\$</u>	Copy here→	\$0.00	\$
	om rental and other real property (before all deductions)	Debtor 1 Debtor 2 \$_0.00 \$			
Ordinary and r	necessary operating expenses	- \$ <u>0.00</u> - \$			
•	come from rental or other real property	\$_0.00 \$	Copy here	\$0 <u>.0</u> 0	\$
7. Interest, divid	ends, and royalties			\$ <u>0.0</u> 0	\$

Debtor 1 SEIVA - First Name Middle Name Last Name	kumar	Case number (if known)	
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
8. Unemployment compensation		s 0.00	\$
Do not enter the amount if you contend that the amoun		*	V
under the Social Security Act. Instead, list it here:			
For you			
For your spouse	·		
Pension or retirement income. Do not include any an benefit under the Social Security Act.	nount received that was a	\$ 0.00	\$
10. Income from all other sources not listed above. Spe Do not include any benefits received under the Social S as a victim of a war crime, a crime against humanity, or terrorism. If necessary, list other sources on a separate	Security Act or payments recornity act or domestic	eived	
Rental		\$ <u>1,300.0</u> 0	\$
		\$0.00	\$
Total amounts from separate pages, if any.		+ \$0.00	+ \$
Calculate your total current monthly income. Add fir column. Then add the total for Column A to the total for column.	r Column B.	\$_1,300.00 +	\$
Part 2: Determine Whether the Means Test A	oplies to You		
12. Calculate your current monthly income for the year	. Follow these steps:		designation we will see the second
12a. Copy your total current monthly income from line	Сор	by line 11 here - \$ 1,300.00	
Multiply by 12 (the number of months in a year).			· x 12
12b. The result is your annual income for this part of t	he form.		12b. \$ <u>15,600.00</u>
13. Calculate the median family income that applies to	you. Follow these steps:		
Fill in the state in which you live.	Texas		
Fill in the number of people in your household.	1		
Fill in the median family income for your state and size	of household		s <u>63,594.00</u>
To find a list of applicable median income amounts, go instructions for this form. This list may also be available			
14. How do the lines compare?			
14a. Line 12b is less than or equal to line 13. On the	ne top of page 1, check box 1	, There is no presumption	of abuse.
14b. Line 12b is more than line 13. On the top of pa Go to Part 3 and fill out Form 122A–2.	age 1, check box 2, The pres	sumption of abuse is deter	mined by Form 122A-2.
Part 3: Sign Below			
By signing here, I declare upder penalty of perj	ury that the information on th	nis statement and in any at	ttachments is true and correct.
* MAIA	×	•	
Signature of Debtor 1	 	Signature of Debtor 2	
Date 06/30/2017		Date	
MM / DD / YYYY		MM / DD / YYYY	-
If you checked line 14a, do NOT fill out or fi	ile Form 122A–2		
If you checked line 14b, fill out Form 122A-			